

MISSOURI DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF GEOLOGY AND LAND SURVEYWATER WELL RECORD  
AND  
PUMP INFORMATION RECORD

(PLEASE PRINT CLEARLY)

DO NOT FILL IN		ECG
EF NO	87531	C K O 16996
99 ERE CENO		775601X D
WFL UM	A29777	E ERED
C EC E	NO	D EYER D
ROVE		D PRO B

OWNER NAME <b>Angela Fortune</b>		ADDRESS <b>HCR 78 Box 187</b>		CITY <b>Gradericktown</b>		STATE <b>MO</b>		ZIP CODE <b>63645</b>	
OWNER STATUS <input type="checkbox"/> BUILDING CONTRACTOR <input checked="" type="checkbox"/> PRIVATE HOME OWNER		<input type="checkbox"/> DEVELOPER <input type="checkbox"/> OTHER (SPECIFY)		<input type="checkbox"/> BUILDER					
DRILLING CONTRACTOR NAME <b>Goggins Drilling Inc</b>		PUMP CONTRACTOR <b>Goggins Drilling Inc</b>		ME <b>8-31-92</b>					
DRILLING EQUIPMENT <input type="checkbox"/> MUD ROTARY <input type="checkbox"/> CABLE TOOL <input type="checkbox"/> REVERSE ROTARY <input type="checkbox"/> AUGER (TYPE) <input type="checkbox"/> AIR ROTARY <input type="checkbox"/> OTHER (SPECIFY)		CO LE <b>8-31-92</b>							
CASING DETAILS LENGTH <b>160 ft</b> 6 in WEIGHT <b>13 lb</b> 8 5/8'		JOINTS <input type="checkbox"/> THREE DED <input type="checkbox"/> WE DED <input type="checkbox"/> UED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		MATERIAL <input checked="" type="checkbox"/> STEEL <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER (SPECIFY)					
PACKER INFORMATION USED ON C S G? C E DE T ( )		USED ON <input type="checkbox"/> YES <input type="checkbox"/> NO		C E DE ( )					
CASING GROUTING DETAILS <input checked="" type="checkbox"/> FULL LENGTH <input type="checkbox"/> TOP <input type="checkbox"/> BOTTOM		M L UDED <input type="checkbox"/> NEAT CEMENT <input type="checkbox"/> BENTONITE <input checked="" type="checkbox"/> CUTTINGS <input type="checkbox"/> OTHER		D O SE TOP BOTTOM		S CKS O C MENT OR B O I E TOP BOTTOM		OR LI O SUS E DED 72 RS FTER GROUT NOT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
LINER DETAILS LE OTH <b>260 ft</b> 5 in M (IN) <b>188</b>		W L OTH OR DR NO S UNIF CE		JOINTS <input type="checkbox"/> THREADED <input checked="" type="checkbox"/> WELDED <input type="checkbox"/> GULVED		MATERIAL <input checked="" type="checkbox"/> STEEL <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER (SPECIFY)			
LINER GROUTING DETAILS TYPE OF SEAL <input checked="" type="checkbox"/> FULL LENGTH <input type="checkbox"/> TOP <input type="checkbox"/> BOTTOM		M TER A SED <input type="checkbox"/> NEAT CEMENT <input type="checkbox"/> BENTONITE <input checked="" type="checkbox"/> OTHER		DEPTH O SEAL TOP BOTTOM		BACKS OF CEMEN OR BENTONITE TOP BOTTOM		FULL LENGTH	
SCREEN DETAILS M KEO T PE LENG OPEN TO O E ( )		SLOT S ZE D M ( )		TH C ESS O GR VEL C		GRAVEL SIZE (IN) FROM (FT) TO (FT)			
YIELD TEST <input type="checkbox"/> BAILED <input type="checkbox"/> PUMPED <input checked="" type="checkbox"/> COMPRESSED AIR		OURS E D (G M) <b>8 GPM</b>		WE O S N ECTED FTE D ILLING? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		E O F T O C S O SEAL <input checked="" type="checkbox"/> PITLESS ADAPTER <input type="checkbox"/> WELL SEAL <input type="checkbox"/> OTHER			
WATER LEVEL EASURE F OM LAND SUR CE STAT C ( ) <b>90 ft</b>		W DOW O PUM NG E E DURING YIELD TEST AFTER <b>3</b> HOURS		ABANDONED WELL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		S EREAN AB DONED WC L? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		W S PRO E L SEALE T <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
COMPLETION DATA UM C CT <b>5 GPM</b> <b>3/4 HP</b> STAGES AT SETTING <b>380</b> FT		MAKE OF PUMP <b>Waterol</b> TYPE OF DROP PIPE <input checked="" type="checkbox"/> PLASTIC <input type="checkbox"/> GALVANIZED		WELLS O S U T <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		PUMP SET BY <input checked="" type="checkbox"/> PUMP INSTALLER <input type="checkbox"/> OWNER <input type="checkbox"/> DRILLER NOT TO BE INSTALLED UNTIL			
DEPTH FROM LAND SURFACE FEET TO FEET		FORMATION DESCRIPTION		DIAMETER OF DRILL HOLE		LOCATION OF WELL SHOW LOCATION IN SECTION PLAT			
AREA NO <b>16</b>		COUNTY <b>St Francois</b>		SURFACE ELEVATION		TWN <b>34 N</b> N RND <b>7 E</b> FOR NW			
TOTAL DEPTH OF WELL <b>410 ft</b>		SKETCH EXACT LOCATION OF WELL WITH DISTANCES TO AT LEAST TWO PERMANENT LANDMARKS ALSO SHOW ABANDONED WELL FOR MONITORING WELLS LANDMARKS ARE TEMPORARY AND PERMANENT BENCHMARKS		BARN		HOUSE			
IF YIELD WAS TESTED AT DIFFERENT DEPTHS DURING DRILLING LIST BELOW		FEET		GALLONS PER MINUTE		I HEREBY CERTIFY THAT THE WELL HEREIN DESCRIBED WAS CONSTRUCTED IN ACCORDANCE WITH THE DEPARTMENT OF NATURAL RESOURCES REQUIREMENTS FOR THE CONSTRUCTION OF WATER SUPPLY WELLS AND/OR MONITORING WELLS			
410 ft		8 GPM				SIGN URB (WELL OR LE) <b>Angela Fortune</b> SIGN TU EPI <b>Angela Fortune</b>			
NO ES M LEAGE AND D EC IG FROM E RE9 TOWN D O WAY Hwy T 5 1/4 miles E of Hwy 00		D E <b>9-8-92</b>		PERM TWO (WELL OR EPI) <b>00026 A00042</b>		D E <b>9-8-92</b>		PERM O (UM S LLE) <b>000325 A00042</b>	
INFORMATION TO BE SUPPLIED BY OWNER		FOR MONITORING WELLS ONLY		WELL POINT NUMBER		WASTE MANAGEMENT IEPA ID NO			
PROPOSED USE OF WELL <input type="checkbox"/> DOMESTIC (O SCON C O S) <input type="checkbox"/> PUBLIC WATER SUPPLY <input type="checkbox"/> HEAT PUMP <input type="checkbox"/> OTHER (SPECIFY)		<input type="checkbox"/> MULTIPLE FAMILY <input type="checkbox"/> NON COMMUNITY <input type="checkbox"/> IRRIGATION <input type="checkbox"/> MONITORING		MEAN SEA LEVEL		UND <input type="checkbox"/> LANDFILL <input type="checkbox"/> OTHER			
SIGNATURE (WELL OWNER) <b>Angela Fortune</b>		D T C		WCI 11/23/92 WCA 3/9/93		PLETION			

DISTRIBUTION: WHITE/DRILLER CARRY/OWNER  
MAIL CANARY COPY TO: WELL DRILLERS FUND P.O. BOX 280  
ROLLA, MO 65401  
ENCLOSE \$35 WATER WELL CERTIFICATION FEE  
WITHIN 60 DAYS AFTER WELL COMPLETION

40108581



SUPERFUND RECORDS

Site	Big River Mine
ID #	MOB981126899
Break	1.6
Other	10-30-82

07CR